

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICOIN RE: **ELVIN JOSE CEDENO MORALES**
IRIS GIGY ROSA VELEZBK. CASE # **10-02767** **BKT**PMB 441 PO BOX 2400 TOA BAJA, PR 00951
DEBTOR(S) SSN: XXX-XX-6567 SSN: XXX-XX-9973

CHAPTER 13

CHAPTER 13 PAYMENT PLAN

NOTICE: * The following plan contains provisions which may significantly affect your rights. You should read this document carefully and discuss it with your attorney. When confirmed, the plan will bind the debtor and each creditor to its terms. Objections must be filed in writing with the Court and served upon the debtor(s), debtors' counsel, the Trustee and any other entity designated by the Court, at the 341 meeting of creditors or not less than twenty (20) days prior to the scheduled confirmation hearing. For post confirmation Plan Modifications, objections must be filed and notified in the same manner within twenty (20) days from its notification. * See the notice of commencement of case for 341 meeting date and claims bar date, the latter is the date by which a proof of claim must be filed in order to participate of the plan distribution.

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee:
 directly by payroll deductions, as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinabove provided in the DISBURSEMENT SCHEDULE.
3. The Confirmation Order will not vest property of the Estate on Debtor(s) until the Order discharging Debtor(s) is entered.

PLAN DATED:
 PRE POST-CONFIRMATION AMENDED PLAN DATED: **6/18/2010**FILED BY DEBTOR TRUSTEE UNSECURED CREDITOR**I. PAYMENT PLAN SCHEDULE**

\$ 250.00	x 60	= \$ 15,000.00
\$ _____	x _____	= \$ _____
\$ _____	x _____	= \$ _____
\$ _____	x _____	= \$ _____
\$ _____	x _____	= \$ _____
TOTAL = 60		\$ 15,000.00

Additional Payments:
\$ 47,000.00 to be paid as a LUMP SUM
within 12 months of conf. with proceeds to come from

Sale of property identified as follows:

Other: **REFINANCING OR SALE OF RESIDENTIAL PROPERTY**

Periodic Payments to be made other than and in addition to the above.

\$ _____ x _____ = \$ _____

To be made on:

PROPOSED PLAN BASE: \$ 62,000.00

II. ATTORNEY'S FEES

To be treated as a § 507 Priority, and paid before any other creditor and concurrently with the Trustee's fees, unless otherwise provided:

a. Rule 2016(b) Statement: \$ 3,000.00
b. Fees Paid (Pre-Petition): (\$ 500.00)
c. R 2016 Outstanding balance: \$ 2,500.00

d. Post Petition Additional Fees: \$ _____
e. Total Compensation: \$ 3,000.00

Paid during months # To

Signed: /s/ ELVIN JOSE CEDENO MORALES

DEBTOR

/s/ JUAN O. CALDERON-LITHGOW

JOINT DEBTOR

/s/ JUAN O. CALDERON-LITHGOW

BY: ATTORNEY

 AMENDED PLAN DATED: **6/18/2010**FILED BY DEBTOR TRUSTEE UNSECURED CREDITOR**II. DISBURSEMENT MADE IN THE FOLLOWING ORDER AND AFTER ADMINISTRATIVE EXPENSES**

A. SECURED CLAIMS: Debtor represents that there are no secured claims.
 Secured creditors will retain their liens and shall be paid as follows:

1. ADEQUATE PROTECTION Payments: Cr. _____ \$ _____
2. Trustee will pay secured ARREARS: (Below, write V for vehicle, M for Mortg, F for furniture & O for Other in box)

Cr. RNPM	<input checked="" type="checkbox"/>	Cr. R&G MORTG	<input checked="" type="checkbox"/>	Cr. _____
Acct. 101826793		Acct. 201882		Acct. _____
\$ 27,371.95		\$ 9,543.92		\$ _____
Monthly Pymt. \$ _____		Monthly Pymt. \$ _____		Monthly Pymt. \$ _____
Month# _____ To Month# _____		Month# _____ To Month# _____		Month# _____ To Month# _____

3. Trustee will pay REGULAR MONTHLY PAYMENTS:

Cr. _____	Cr. _____	Cr. _____
Acct. _____	Acct. _____	Acct. _____
Monthly Pymt. \$ _____	Monthly Pymt. \$ _____	Monthly Pymt. \$ _____

4. Trustee will pay IN FULL Secured Claims:

Cr. CRIM	Cr. _____	Cr. _____
\$ 30.76	\$ _____	\$ _____

5. Trustee will pay VALUE OF COLLATERAL:

Cr. _____	Cr. _____	Cr. _____
\$ _____	\$ _____	\$ _____

6. Secured Creditor's interest will be insured. INSURANCE POLICY will be paid through plan:

Cr. _____	Ins. Co. _____	Premium: \$ _____
(Please indicate in "Other Provisions" the insurance coverage period)		

7. Debtor SURRENDERS COLLATERAL TO Lien Holder: _____

8. Debtor will maintain REGULAR PAYMENTS DIRECTLY to:

R&G AND OPERATING PARTNERS

B. PRIORITIES. The Trustee will pay §507 priorities in accordance with the law [§1322 (a)(2)].

C. UNSECURED PREFERRED: Plan Classifies Does not Classify Claims.

<input type="checkbox"/> Class A-	<input type="checkbox"/> Co-debtor Claims:	<input type="checkbox"/> Pay 100% / <input type="checkbox"/> "Pay Ahead".
<input type="checkbox"/> Class B-	<input type="checkbox"/> Other Class:	_____
<input type="checkbox"/> Cr. _____	<input type="checkbox"/> Cr. _____	<input type="checkbox"/> Cr. _____
\$ _____	\$ _____	\$ _____

D. GENERAL UNSECURED NOT PREFERRED: (Case Liquidation Value = \$ _____)

Will be paid 100% plus _____ % Legal Interest Will be paid Pro-Rata from any remaining funds

OTHER PROVISIONS:

ANY TAX REFUND RECEIVED WILL BE USED TO FUND THE PLAN
DEBTOR WILL CONTINUE DIRECT PAYMENTS TO VEHICLE FORD
EXPLORER THEY OWN ON BEHALF OF PENTAGON FED CREDIT UNION,
AND REGISTERED TO MR HECTOR ROSA SANCHEZ